

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000035985

FILED  
Mar 27, 2007  
Secretary of State

Entity Name: ARTISTIC STONE CREATIONS OF FLORIDA, INC.

## Current Principal Place of Business:

578 BLUE PARK ROAD  
ORANGE CITY, FL 32763 US

## New Principal Place of Business:

## Current Mailing Address:

578 BLUE PARK ROAD  
ORANGE CITY, FL 32763 US

## New Mailing Address:

P.O. BOX 740256  
ORANGE CITY, FL 32774 US

FEI Number: 20-4521598

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CARRERA, MARYSOL  
578 BLUE PARK ROAD  
ORANGE CITY, FL 32763 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: CARRERA, MARYSOL  
Address: 608 N FIRWOOD DR  
City-St-Zip: DELTONA, FL 32725 US

Title: T (X) Delete  
Name: CARRERA, PEDRO  
Address: 608 N FIRWOOD DR  
City-St-Zip: DELTONA, FL 32725 US

Title: S ( ) Delete  
Name: LEBRON, BENJAMIN  
Address: 1081 EAST HANCOCK DRIVE  
City-St-Zip: DELTONA, FL 32725

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: CARRERA, MARYSOL  
Address: P.O. BOX 740256  
City-St-Zip: ORANGE CITY, FL 32774 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR ( ) Change (X) Addition  
Name: BUCKLAND, JAMES K SR  
Address: P.O. BOX 5113  
City-St-Zip: DELTONA, FL 32725

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARYSOL CARRERA

P

03/27/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date